					•	
Fill in this info	rmation to id	entify your case:				
Deblor 1	Michael First Name	Middle Name	Gordon Last Name			ate to the factor is a
Deblor 2	Meghan	M.	Gordon		Che	ck If this is:
(Spouse, if filing)	First Name	Middle Name	Last Name			An amended filing
United States Bar	• •	or the: EASTERN D	IST. OF PENNS	/LVANIA		A supplement showing postpetition chapter 13 income as of the following date:
Case number (if known)	20-12102					MM / DD / YYYY
Official Form	<u>1061</u>					
Schedule I: Y	our Incom	е				12/15
responsible for sup include information about your spouse. your name and case	plying correct i about your spo If more space	nformation. If you are ouse. If you are separ is needed, attach a se own). Answer every c	e married and not rated and your spo eparate sheet to th	filing jointly, and ouse is not filing	d your with y	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1. Fill in your emp						
information.	Joynnesic		Debtor 1			Debtor 2 or non-filing spouse
If you have mor job, attach a se with information	parate page	Employment status	☑ Employed			☑ Employed ☐ Not employed
additional empl	NAIS	Occupation	■ Not employ	eu		Not employed
Include part-time		Occupation				
or self-employe	d	Employer's name	FMFCU			Southeast Delco School District
Occupation may student or home applies.		Employer's address	Number Street			Number Street
				. A stomum	******	
			City	State Zip	Code	City State Zip Code
	ĺ	How long employed t	here?			
Part 2: Give	Details Abo	ut Monthly Incom	e			
				ing to report for a	ny line	, write \$0 in the space. Include your
non-filing spouse uni	ess you are sep	arated.				
		more than one employate sheet to this form.	er, combine the ini	omiation for all el	прюуе	rs for that person on the lines below. If
				For Debto	or 1	For Debtor 2 or non-filing spouse
		ary, and commissions nonthly, calculate what		2. \$6, 5	<u>63.44</u>	\$9,562.49
3. Estimate and li	st monthly over	time pay.		3. +	\$0.00	\$0.00
4. Calculate gross	income. Add	line 2 + line 3.		4. \$6,5	63.44	\$9,562.49

	tor 1 Michael Gordon		_		40400		
nen	tor 2 Meghan M. Gordon		Case nun	, , , , , , , , , , , , , , , , , , , ,	12102		
			For Debtor 1	For Debtor 2 or non-filing spouse			
	Copy line 4 here	4.	\$6,563.44	<u>\$9,562.49</u>			
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a,	\$1,303.57	<u>\$1,833.11</u>			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00			
	5e. Insurance	5e.	\$0.00	<u>\$15.03</u>			
	5f. Domestic support obligations	5f.	\$0.00	\$0.00			
	5g, Union dues	5g.	\$0.00	\$0.00			
	5h. Other deductions.						
	Specify: See continuation sheet	. 5h.+	\$331.15	<u>\$1,168.73</u>			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6,	\$1,634.72	\$3,016.87			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,928.72	\$6,545.62			
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$340.75	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00	\$0.00			
	8e. Social Security	8e.	\$0.00	\$0.00			
	8f. Other government assistance that you regularly receive include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	ቀለ ለለ	\$0.00			
	•	•	\$0.00	· · · · · · · · · · · · · · · · · · ·			
	8g. Pension or retirement income	8g.	\$0.00	\$0.00			
	8h. Other monthly income. Specify: Dream Dinners operations, Inc.	8h. 🛊	\$0.00	\$221.81			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$340.75	\$221.81			
10.	Calculate monthly income. Add line 7 + line 9.	10.	\$5,269.47	+ \$6,767.43	= \$12,036.90		
4.4	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in S	ahadu	le I				
11.	Include contributions from an unmarried partner, members of your househ friends or relatives.	old, yo	our dependents, you	ır roommates, and otl	ner		
	Do not include any amounts already included in lines 2-10 or amounts tha	t are n	ot available to pay o	expenses listed in Sc	hedule J.		
	Specify:			11.	+ \$0.00		
							
12.	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. 12. \$12,036.90 Combined monthly income						
13.	Do you expect an increase or decrease within the year after you file t	his for	m?				
	No. None.						
	Yes. Explain:						

	otor 1 Michael Gord otor 2 Meghan M. G				Case nun	nber (if known) 20-12102		
1.	Additional Employers	Debtor 1			<u>Debtor 2 or nor</u>	n-filling spouse		
	Occupation							
	Employer's name Doordash				Dream Dinners			
	Employer's address	\$1-d	<u></u>					
		City	State	Zip Code	City	State Zip	Code	
	How long employed th	ere?						
5h.	Other Payroll Deduction				For Debtor 1	For Debtor 2 or non-filling spouse		
	LST 151107 Chadds	Ford Twp / Ret1	*****	****	\$4.33	\$676.88		
	PA UI/HC/WF / UI				\$3.94	<u>\$5.42</u>		
	401(k) / EMSFOL				\$257.06	\$4.33		
	401(k) Loan / LTD1				\$55.03	\$37.71		
	Auto Reimbursemer	at / HDHPT5			\$10.79	<u>\$105.94</u>		
	403B-3					<u>\$62.50</u>		
	231103					<u>\$95.68</u>		
	HSA T					\$120.00		
	DueP1					\$60.27		
				Totals:	\$331.15	\$1,168.73		

Debtor 1 Debtor 2	Michael Gordon Meghan M. Gordon		Case number (if known)	20-12102
8a. Allache	ed Statement (Debtor 1)			
		Doordash		
Gross Mo	nthly income:			\$807.25
Expense		Category	Amount	
Phone		Phone	\$250.00	
Gas		Gasoline	\$216.50	
Total Mon	thly Expenses			\$466.50
Net Month	nly Income:			\$340.75

Official Form 106i Schedule i: Your income page 4